

2019 ECW Annual Spring Retreat Registration Form

Please only register one person per form. Feel free to make as many copies of this form as needed.

First + Last Name

Parish

Street Address

City + State

Zip Code

Primary Phone

Email Address

I WILL ATTEND:

Full Weekend

Rates: Dormitory (\$110) Cabin: (\$180) Retreat Village: (\$180)

Is this your first year attending the ECW Spring Retreat?

Lodging Preference:

1st Choice _____

2nd Choice _____

Private room: (add \$55.00 to above pricing) _____

YES NO

Saturday ONLY (sessions start at 9 am and include lunch - \$35.00)

Please list any special housing, dietary or medical needs: _____

Roommate or group preferences: _____

TOTAL ENCLOSED \$ _____

Checks payable to ECW, Diocese of Atlanta

DON'T FORGET YOUR DONATIONS FOR MIMI'S PANTRY OR FROM CAMP MIKELL'S WISHLIST.

Mail registrations to: Diane Burrows, 1220 Satellite Blvd., Apt. 510, Suwanee, GA 30024

The *Alice Sylvia Child Memorial Scholarship Fund* funds scholarships to the ECW Spring Retreat at Camp Mikell. Optional donations to this fund are much appreciated. Please consider donating: \$ _____

Make check payable to **ECW, Diocese of Atlanta** and note that it is for the scholarship fund. Mail your check with your registration form.

Saturday Sessions

You may attend any two of the concurrent sessions. For planning purposes, we need to know how many will be attending each session.

PLEASE CHOOSE NO MORE THAN 2.

Walk to Cross Yoga

Prayer Dolls Meditation